April 9, 1957

Dear Mr. Beesley:

On March 30, 1957, representatives of the American Medical Association, the Association of State and Territorial Health Officers, and the National Foundation for Infantile Paralysis met with us to review the current status of the poliomyelitis vaccination program and to consider what actions would best facilitate future program planning and operation. Dr. Haldeman has already sent you a copy of the press release issued at the conclusion of the meeting which summarizes the views and recommendations of the organizational representatives. The purpose of this letter—and of identical letters being addressed to the presidents of the other poliomyelitis vaccine manufacturing companies—is to emphasize for your information and guidance those conclusions and recommendations having special relevance to the production and distribution of vaccine.

The group was unanimous in its views that equitable distribution of vaccine could be secured without the inauguration of a Federally controlled allocation system. It was felt that the various vaccine manufacturers, if supplied with adequate information concerning State and local vaccination plans, vaccine shipments and inventories, vaccine utilization, and other pertinent data, could so arrange the sale and shipment of available vaccine to ensure that it will be equitably available throughout the United States without Federal controls. Based on our previous discussions with your company and other companies we are confident that the vaccine manufacturers would also prefer this course of action and will cooperate with the States and other users of vaccine to ensure the equitable distribution of vaccine during this period when demand exceeds supply.

The group considered it would be desirable for me to pass on to you their views concerning certain priorities which they recommended be given in the distribution of vaccine. These are as follows:

1) It was suggested that priority during the next month be given to shipments of vaccine into the southern States both because the poliomyelitis season begins earlier in the South and because schools generally close sooner in those States.

- 2) The group recommended that commercial vaccine supplies be maintained in those States where vaccine is being sold to public agencies in order to assure that vaccinations can be provided through both public and private channels rather than only through public clinics.
- 3) The group recommended that preference in vaccine shipments be given to the needs of communities for vaccinating children under twenty years of age and pregnant women during the shortage period.
- 4) The group recommended that priority be given to vaccine shipments into those States and communities where plans for vaccination programs are in such a condition of readiness as to ensure rapid utilization of the vaccine.

The Public Health Service is designating staff members in each of its eight regional offices to devote their full time to the collection and evaluation of information concerning State and local vaccination programs, plans, and vaccine needs. These data will be made available at frequent intervals to all vaccine manufacturers, State health departments, State medical societies, State chapters of the National Foundation for Infantile Paralysis, and to the national headquarters of such organizations. To the maximum extent possible we will undertake to secure such information as you and other manufacturers would consider to be useful in securing an equitable distribution of your vaccine production in order to ensure the most effective and rapid utilization of the vaccine.

Representatives of all the organizations also agreed that year-round campaigns to promote poliomyelitis vaccination for all individuals up to at least forty years of age was imperative and all agreed to undertake such campaigns.

I have directed the Public Health Service information staff to cooperate fully in a promotional program this fall. As one of the major aspects of this program, we are arranging with the National Advertising Council to conduct in the fall a nationwide vaccination program promotion.

The National Foundation for Infantile Paralysis has also indicated its intensions to carry out on a national, State, and local basis an intensive promotional program to urge widespread use of vaccine this fall. In addition, representatives of the American Medical Association have indicated they will encourage their State and local societies this fall to carry out the same type of professional participation in program planning and promotion which has been so effective this spring.

It was the consensus of the participants in the meeting that the combined effect of these educational and promotional efforts would ensure a sustained high demand for vaccine throughout the fall and winter months. Accordingly, the group believed that the need for vaccine production during the last six months of this year will exceed the July through December production estimates of approximately 50,000,000 net cc. furnished us recently by the five manufacturers. We hope, therefore, you will carefully evaluate the potential demand for vaccine which will result from these promotional plans in relation to your current production schedule. If your evaluation agrees with ours, we hope you will increase your vaccine production accordingly and let us know as soon as possible what adjustments you plan to make.

I have asked the representatives of these same groups to meet with us again in the next few months to make final plans for our fall campaigns and to initiate planning for promotion of vaccination programs after the first of the year.

We would welcome any comments or suggestions you may have concerning the results of this meeting or any other aspects of the poliomyelitis vaccination program. We appreciate very much the wholehearted cooperation which your company and the other vaccine manufacturers have given to the successful operation of the nation-wide vaccination program. In soliciting your continued cooperation, we wish to assure you that the facilities of the Public Health Service are available to you for such assistance as we may appropriately provide.

Sincerely yours,

/Sgd/

Surgeon General

Mr. E. H. Beesley President Eli Lilly & Company 740 South Alabama Street Indianapolis 6, Indiana

Identical letters to Parke Davis & Company, Wyeth Laboratories, Sharpe & Dohme, Inc., and Pitman-Moore Company

cc: All Regional Directors
Attn: Regional Medical Directors, PHS
All non-PHS participants in the March 30 meeting